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Debtor 1  Debtor 2 (Spouse, if filing)  First Name  Middle Name  United States Bankruptcy Court for the: Northern Distri  Case number (If known)	Last Name  Last Name  ct of Illinois	UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS  DEC 06 2017  JEFFREY P. ALLSTEADT, CLERK INTAKE Check if this is an amended filling
Official Form 103A		<u> </u>
Application for Individua	ils to Pay the	Filing Fee in Installments 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.		
Part 1: Specify Your Proposed Payment Timetable		
Which chapter of the Bankruptcy Code are you choosing to file under?	Chapter 7 Chapter 11 Chapter 12 Chapter 13	
2. You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to pay them. Be sure all dates are business days. Then add the payments you propose to pay.  You must propose to pay the entire fee no later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final payment timetable.	You propose to pay  \$ 77.50  \$ 77.50  + \$ 77.50	On or before this date
Total	\$310.00	◀ Your total must equal the entire fee for the chapter you checked in line 1.
Part 2: Sign Below		
By signing here, you state that you are unable to pay the full filling fee at once, that you want to pay the fee in installments, and that you understand that:  You must pay your entire filing fee before you make any more payments or transfer any more property to an attorney, bankruptcy petition preparer, or anyone else for services in connection with your bankruptcy case.  You must pay the entire fee no later than 120 days after you first file for bankruptcy, unless the court later extends your deadline. Your debts will not be discharged until your entire fee is paid.  If you do not make any payment when it is due, your bankruptcy case may be dismissed, and your rights in other bankruptcy proceedings may be affected.		
Signature of Debtor 1	Signature of Debtor 2	Your attorney's name and signature, if you used one
Date 10 (X) ON / YYYY	Date MM / DD / YYYY	Date MM / DD / YYYY